Evaluation of the Health Manager's Toolkit Survey Report

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I. BACKGROUND AND OBJECTIVES

The Health Manager's Toolkit was conceived in 1997 as a collaborative effort of Management Sciences for Health (MSH) and Family Health International (FHI). It was launched in November 1997 in English, and is now available in Spanish, French, and Portuguese. The purpose of the Health Manager's Toolkit is to assist health professionals at all levels of an organization to provide accessible high-quality and sustainable health services.

The Health Manager's Toolkit is an electronic compendium located on MSH's Web site in the Electronic Resource Center (ERC), at http://erc.msh.org/toolkit. The Toolkit currently has 57 tools developed by 21 different U.S. or international agencies working in health and family planning around the world. The Toolkit is organized around ten management categories:

- leadership development
- clinical services and quality management
- financial management
- information management
- health policy and reform
- organizational sustainability
- human resources management
- organizational planning
- community health services
- drug and supply management.

The Toolkit provides an annotation for each tool and the tool itself or information indicating where the tool may be obtained. Each annotation describes:

- the purpose of the tool;
- advantages and limitations of the tool;
- where the tool has been used;
- the organization that developed the tool;
- written support materials, such as user's guides or facilitator's guides.

The Toolkit also includes links to other toolkits and a message board, where users can share their thoughts about the tools on the Toolkit. The site has an average of over 1,000 visits per month.

In June 2003, the Management and Leadership (M&L) Program, which implements the Toolkit activity, initiated a compulsory survey to evaluate the Toolkit's use and impact, to find out how it aids health managers in their work, and to generate recommendations that could be used to modify and improve the Toolkit. M&L decided to implement a compulsory survey because few responses have been received over the years from a voluntary survey routinely posted on the site. The objectives of the survey were to:

find out who Toolkit users are

- identify the tools that are used the most
- learn how the tools are used and what impact they have on the user's work
- obtain general opinions from users about the Toolkit in order to improve the site

II. DESIGN AND METHODOLOGY

The survey was designed by the Administrator and Manager of the Toolkit, together with staff of MSH's Electronic Products Group (EPG), in consultation with M&L's Monitoring and Evaluation (M&E) Unit. The survey was posted for one month on the homepage of the English, French, Spanish, and Portuguese editions of the Toolkit beginning June 2003.

The Electronic Products Group was responsible for collecting survey information and providing a report of the raw data at the end of the survey. The Administrator and Manager of the Toolkit synthesized, analyzed and interpreted the data. Results and recommendations were discussed with the M&E Unit prior to finalizing this report.

1. Survey sections

The original survey posted at the beginning of June consisted of an Introductory Section (one question), Section 1 (four questions) which gathered background information on the users, and Section 2 (ten questions) which collected information about the use of tools on the Toolkit. (See Annex 1 for a copy of the original survey.) Midway through June, it was noted that the introductory section was not clear. At that point the original survey was modified: one question was added to both the introductory section and to Section 2. (See Annex 2 for copy of the modified survey.) The questions in the survey included yes/no questions, multiple choice questions, and open-ended questions.

2. Variables in each section

The selection of the variables followed the general objectives of the survey, and was based on previous user's surveys conducted by MSH for print and electronic media.

In order to have a clearer picture of the Toolkit audience, the questions in Section 1 addressed the characteristics of the audience: country of origin, profession, type of organization, and knowledge of the Toolkit. Section 2 questions addressed the use and the impact of the tools, and asked for users' opinions in a few areas: categories visited, tools downloaded, purpose for using a tool, impact of the tool on the user's work and organization, information that the user would like to see in the Toolkit, and opinions and recommendations about the Toolkit, in general.

III. RESULTS

There were 1,023 visits to the Toolkit in June according to the monthly Web Trends report prepared by the EPG. However there were only 379 responses to the survey during this same period. While this may be considered a good response rate, there are several possible reasons for the difference between the number of visits and the number of responses to the survey. First, when a user enters the Toolkit's home page, it is counted as a visit by the Web tracking software used by MSH. The mandatory nature of the survey may have led some users to exit the Toolkit before answering the survey. The EPG retrieved approximately 700 records, of which about 300 were empty and were deleted from the database. Second, when a user completed the survey and then accessed the Toolkit, it might have been counted as another visit. Lastly, a "cookie" is set when a user starts to complete the survey, and it does not expire until the user closes the browser. If the length of the user's session is longer than 20 minutes, it is counted as another visit by the tracking software.

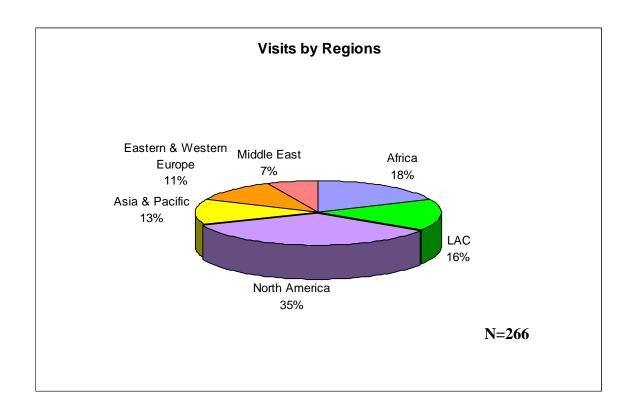
1. Results by variable

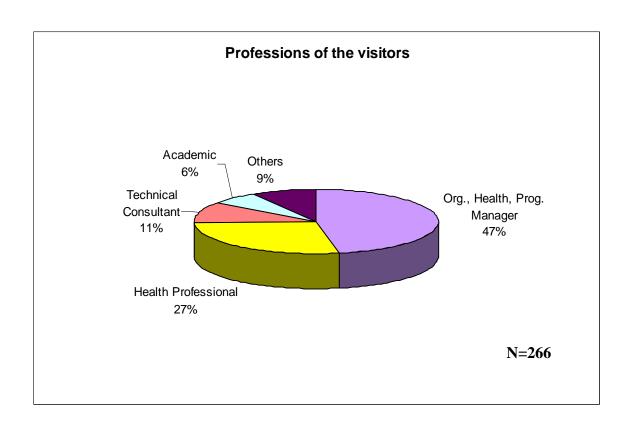
The results by variable are presented in the following pages. In order to facilitate the review of results, pie charts showing the distribution of responses accompany the numerical data.

Section 1 - There were 266 complete responses to Section 1 of the survey. Section 1 gathered background information on the users. Users who had never visited the Toolkit or had not visited the site since the launch of the compulsory survey were compelled to answer this section before being allowed to gain entry into the Toolkit.

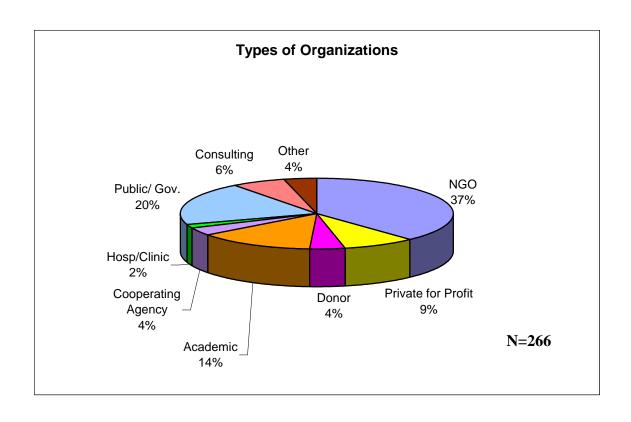
Total number of survey responses	379					
Total number of responses to Section 1 Section 1:		266				
Visits by Regions		266				
Africa	48	18.0%				
Latin America/Carribean	43	16.2%				
North America	93	35.0%				
Asia and Pacific	34	12.8%				
Eastern and Western Europe	30	11.3%				
Middle East	18	6.8%				
	266					
				Program Manager	52	19.55%
				Org. Manager	45	16.92%
Profession		266	▼	Health Manager	28	10.53%
				·		

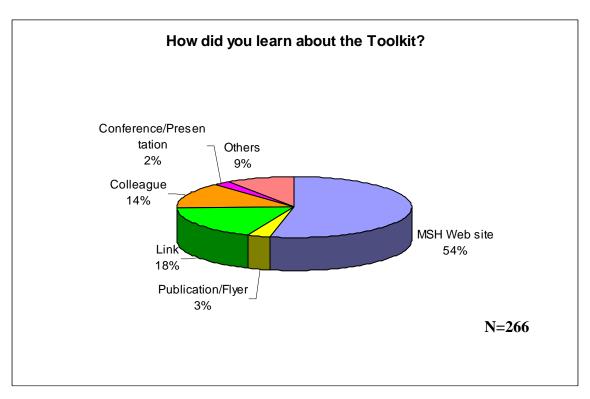
Org., Health, Prog. Manager	125	46.99%			
Health Professional Technical Consultant Academic Others	73 28 17 23	27.44% 10.53% 6.39% 8.65%	Doctor Nurse Other Health workers	13	12.41% 4.89% 10.15%
	266				





Types of Organizations		266
NGO Private for Profit Donor Academic Cooperating Agency Hospital/Clinic Public/ Government Consulting	101 23 11 37 10 4 53 17	38.0% 8.6% 4.1% 13.9% 3.8% 1.5% 19.9% 6.4%
Other	10	3.8%
	266	
How did you learn about the Toolkit?		266





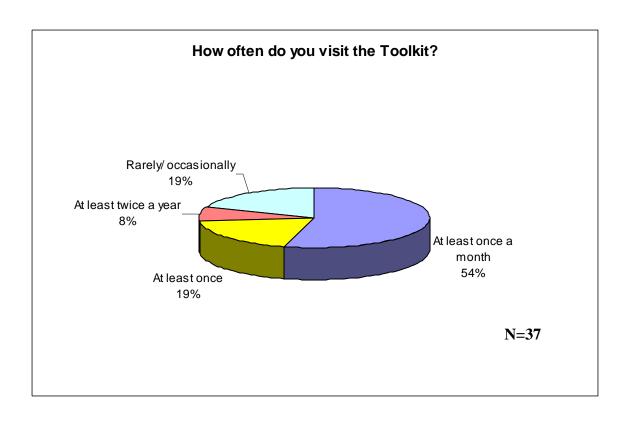
Section 2 - There were 252 responses, many of them incomplete, to Section 2. Again, users were compelled to complete the survey before being allowed to gain entry to the Toolkit, although they were not forced to answer each question. Section 2 was designed for users who had visited the Toolkit previously and had already completed Section 1 of the survey.

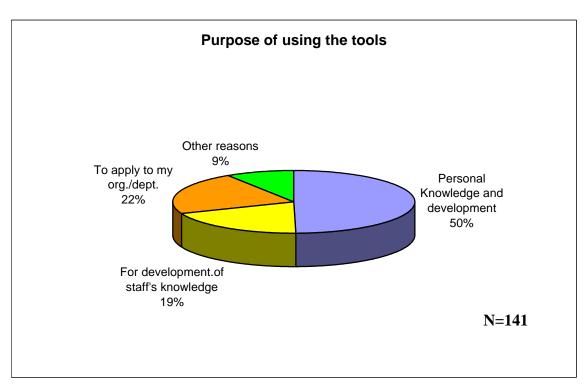
Question #1, "How often do you visit the Toolkit?" was added to the revised survey in mid-June, so there are fewer responses to this question than to others.

The total number of responses to each question in Section 2 varies. In some cases, the number of responses is higher than the number of users completing Section 2 because users could give more than one answer to some of these questions. For instance, users could check more than one answer to the question asking about the purpose of using the tools, categories visited, and in which categories users would like to see more tools. In other cases, the number of responses is lower than the total number of users, either because the users chose to skip some questions (most common with open-ended ones) or because the nature of some answers dictated the omission of subsequent questions (skip pattern).

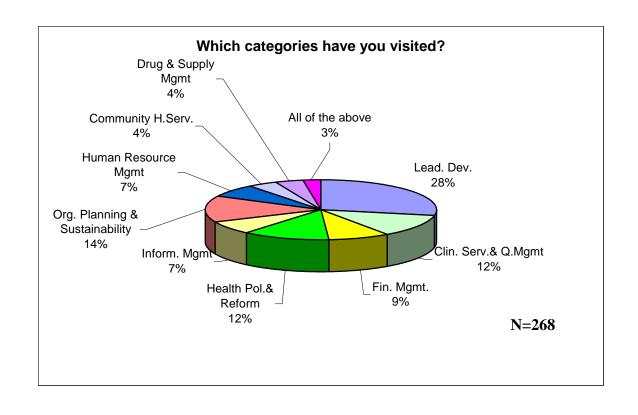
Section 2:

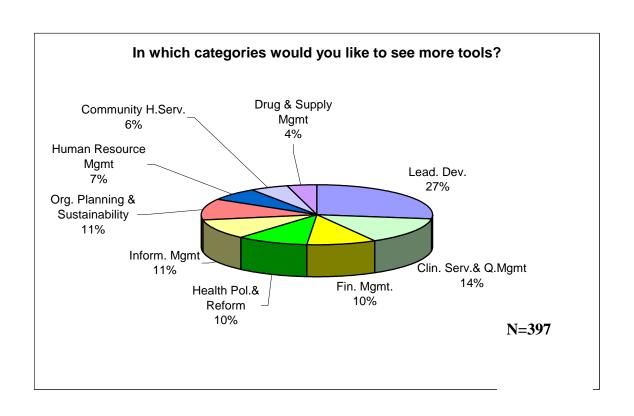
How often do you visit the Toolkit?		37
At least once a month	20	54.1%
At least once	7	18.9%
At least twice a year	3	8.1%
Rarely/ occasionally	7	18.9%
	37	
Purpose of using the tools?		141
Personal knowledge and development For development of staff's	70	49.6%
knowledge	27	19.1%
To apply to my organization/dept.	31	22.0%
Other reasons	13	9.2%
	141	





Which categories have you visited?		268
Leadership Development Clinical Services/Quality Management Financial Management Health Policy & Reform Information Management Organizational Planning & Sustainability Human Resource Management Community Health Services Drug & Supply Management All of the above	75 33 23 33 19 38 19 11 10 7	28.0% 12.3% 8.6% 12.3% 7.1% 14.2% 7.1% 4.1% 3.7% 2.6%
In which categories would you like to see more tools?		397
Leadership Development Clinical Services/Quality Management Financial Management Health Policy & Reform Information Management Organizational Planning & Sustainability Human Resource Management Community Health Services Drug & Supply Management	108 57 39 40 43 45 27 22 16	27.2% 14.4% 9.8% 10.1% 10.8% 11.3% 6.8% 5.5% 4.0%





Problems downloading a tool or obtaining a tool from the developer		235
No Yes	227 8 235	96.6% 3.4%
Would you like to be notified of new tools?		252
No Yes	147 105 252	58.3% 41.7%
Have you downloaded or requested any tools?		252
No Yes	183 69 252	72.6% 27.4%
Have you used any tools from the Toolkit in your work?		252
No Yes	195 44 239	77.4% 17.5%
Have you recommended the Toolkit to anyone?		252
No Yes	162 90 252	64.3% 35.7%

2. Summary of Results

The results of this initial evaluation of the Health Manager's Toolkit show that the product is reaching its target audiences, and fulfilling its main purpose of assisting health professionals to provide high quality, sustainable health services. The majority of users (74%) are health professionals and work in the non-governmental (NGO) sector (37%) or the public sector (20%). The visits per region data document that the Toolkit is reaching a large audience outside the U.S. (65%), both in the developed and developing world. The majority of users (54%) learned about the Toolkit through the MSH web site.

Results regarding the purpose of using the tools are quite good. 69% of the respondents (N=141) use the tools for their own personal knowledge and development (50%) or for the development of their staff's knowledge (19%). And 22% (N=141) have used tools to apply to their own organization. Results that are difficult to interpret are the following: while 97% of respondents (N=235) have not had any problems downloading a tool or obtaining a tool from a developer, 73% (N=252) have never downloaded or requested a tool, and 77% (N=252) have not used any of the tools in their work.

The most popular category (both in terms of visits and requests for more tools) is Leadership Development. Most of the users visited the Toolkit at least once a month and about half (42%) would like to be notified of new tools.

IV. IMPACT ANALYSIS

Users' perspectives: users assessed the impact of the tools in several ways. A summary of responses to open-ended questions, grouped by theme, follows.

The use of the Toolkit impacted users' work and organization because it:

- Improved the design of training activities
- Aided organizational development (for example, strategic planning, proposal development, program design, "better managing", "more leadership skills", team work)
- Served as a teaching aid to expose students to practical tools as useful examples
- Aided in assessments and evaluations
- Served as a reference/resource to provide information on many tools
- Helped users avoid reinventing the wheel
- Helped to create a process
- Changed certain work perspectives
- Improved knowledge of new staff

MSH's perspective: the objectives of the survey were to learn about the users, how the tools are used and what impact the Toolkit has on users' work. The results show that most of the users are within our target audience (health professionals in developing countries) and are using the tools to improve themselves, their staff and their organization. MSH believes that such uses have an impact on services. When managers and health professionals invest in management and leadership development, "they increase their ability to adapt to change . . . reinforce leadership values and apply leadership practices that promote sustainable organizational performance. By practicing both leading and managing, managers are able to achieve results and maintain high-quality services despite the obstacles they face". ¹

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¹ *The Manager*, "Developing Managers Who Lead", Management Sciences for Health, Volume 10, Number 3, 2001, page 1.

V. RECOMMENDATIONS

Users' recommendations: The following is a summary of users' comments:

- Have more tools available to download from the site
- Have more marketing of the Toolkit/ Have short flyers for the tools
- Display a list of tools available on the Toolkit
- Assess impact (measure and improve)
- Underscore the wide use of some of the tools
- Have more practical tools
- Update the tools; some are old
- Have more tools in French and Portuguese
- Make CD-ROMs to distribute the Toolkit to developing countries. Downloading tools is difficult and printing tools takes too much time because of slow internet connections, etc.

Users urged MSH to continue with the Toolkit, which they consider a good, useful and interesting educational link. Some respondents stated that MSH is doing a great job for which they are grateful.

MSH's lessons learned: This initial evaluation of the Toolkit was a great learning experience. Lessons learned include the following:

- Do not modify the survey once it has been posted on the Toolkit
- Do not have a survey format that allows questions to remain unanswered
- Avoid answer choices that are overlapping
- Allow more space for users to answer open-ended questions
- Check responses received at the end of the first week after the survey is posted to make sure that all responses are captured correctly by the data collection software.

Recommendations for MSH:

- A pilot test of the survey, perhaps within MSH, should be conducted prior to posting the next survey. Since surveys sometimes contain unclear wording, answer choices, and/or questions that are difficult to understand, a pilot test could help identify and correct these problems.
- All questions should be made compulsory. This will help to capture valuable responses to open-ended questions and/or questions that ask users for more specific answers.
- Add specific impact questions that are directly related to the specific goals of the Toolkit
- Conduct the compulsory survey annually

- Update tools regularly Increase the number of tools in other languages

ANNEX 1 ORIGINAL SURVEY

Toolkit Survey Questions

The Health Manager's Toolkit is designed to support health and family planning managers around the world with practical tools to provide accessible, high-quality and sustainable services. It is important for us to maintain and improve the resources of the Toolkit to meet the needs of our users, thus we are introducing a new mandatory survey to provide us some background information and feedback about the use of the Toolkit. Your responses will help us determine the kind of resources we add to the website in the future.

Have you completed Section 1 of our Toolkit survey?	
Yes No	
*************************	*****
Section 1: Who are you?	
1) In what country do you live? 2) What is your profession? Check the box that best describes your profession: Organizational manager Program manager Health manager Doctor Nurse Other health worker Technical consultant Other, please specify	

3) For what type of organization do you work?

Check the box that best describes your organization:

- Non-governmental organization (NGO)
- Public/ Government

- Private for-profit organization
- Consulting organization
- Academic institution
- Bilateral or multilateral organization
- Cooperating Agency

_	Other	
•	Otner	

4) How did you learn about The Health Manager's Toolkit?

Check all boxes that apply:

- MSH Web site
- MSH Electronic Resource Center
- Publication/ Flyer
- Link from another web site
- Colleague
- Conference/ presentation
- Other, please specify

Section II: How have you used the Toolkit?

1. Which categories of the Toolkit have you visited?

Check all boxes that apply:

- Leadership Development
- Clinical services and quality management
- Financial management
- Information management
- Health policy and reform
- Organizational sustainability
- Human resources management
- Organizational planning
- Community health services
- Drug and supply management
- None

2. Have you downloa developer?	aded any tools from the Toolkit or requested a tool from a
Check one box:	
• Yes No (Please go to question 7)
3) Have you used a	any of the tools in your work?
Check one box: Yes No	
4) For what purpor	se did you use the tools?
Check all boxes that	apply:
For development	knowledge and development t of my staff's knowledge organization/department
5) In what way did organization?	the use of the tool(s) impact your work and your
Please describe:	
6) Have you had an the developer?	ny problems downloading a tool or obtaining a tool from
Check one box:	
Yes No	
Comments:	
7) In which categor	ry of the Toolkit would you like to see more tools?

Check that all boxes that apply:

- Leadership Development
- Clinical services and quality management

Financial management
• Information management
Health policy and reform
Organizational sustainability
Human resources management
Organizational planning
 Community health services
Drug and supply management
9) Would you like to be notified of any new tools on features - acts. I am the
8) Would you like to be notified of any new tools or features posted on the Health Manager's Toolkit?
Check one box:
• Yes No
If yes, please provide your e-mail address.
9) Have you recommended the Toolkit to anyone?
• Yes No
10) Do you have any other thoughts or recommendations on how we could make the Toolkit more useful?

Thank you for your contribution to this important survey.

ANNEX 2 REVISED SURVEY

The Health Manager's Toolkit Survey

For the month of June, we are conducting a survey on who visits the Health Manager's Toolkit in order to document use and impact.

Please take a few minutes to complete this quick questionnaire. After you finish, you will be sent directly to the Toolkit homepage.*

- Have you ever visited the Toolkit before we launched the survey on May 27?
 Yes No
- 2. Have you visited since May 27 and filled out Section 1 of our survey already? Yes No
- Please note that if you visit the Toolkit within the month of June you will be presented with the survey again, however you will just need to fill out Section 2.

Section	1:	Who	are	you?

- 1. In what country do you live?
- 2. What is your profession?
 - Organizational Manager
 - Health Manager
 - Program Manager
 - Doctor
 - Nurse
 - Other Health Worker
 - Technical Consultant
 - Other

If you chose other, please specify:



- 3. For what type of organization do you work?
 - Non-governmental organization
 - Public/ Government
 - Private for-profit organization
 - Consulting organization
 - Academic Institution
 - Bilateral/ Multilateral organization
 - Cooperating Agency
 - Other

4.	How did you learn about The Health Manager's Toolkit? Check all boxes that apply: MSH Web site MSH electronic Resource Center Publication/ Flyer Link from another web site Colleague Conference/ presentation Other, please specify
Section	n 11: How have you used the Toolkit?
1.	How often do you visit the Toolkit?
2.	Which categories of the Toolkit have you visited? Check all boxes that apply: • Leadership development • Clinical services and quality management • Financial management • Health policy and reform • Information management • Organizational sustainability • Human resources management • Organizational planning • Community health services • Drug and supply management
3.	Have you downloaded any tools from the Toolkit or requested a tool from a developer? Yes No (please go to question 8)
4.	Have you used any of the tools in your work? Yes No
5.	For what purpose did you use the tools? Check all boxes that apply: • For my personal knowledge and development • For development of my staff's knowledge • To apply to my organization/ department • Other reason
6.	In what way did the use of the tool(s) impact your work and your organization? Please describe:

7. Have you had problem downloading a tool or obtaining a tool from the
developer? Yes No
If yes, please describe:
 8. In which category of the Toolkit would you like to see more tools? Check that all boxes that apply: Leadership development Clinical services and quality management Financial management Information management Health policy and reform Organizational sustainability Human resources management Organizational planning Community Health services Drug and supply management
 Would you like to be notified of any new tools or features posted on the Health Manager's Toolkit? Yes No If yes, please provide your e-mail address:
10. Have you recommended the Toolkit to anyone? Yes No
11. Do you have any other thoughts or recommendations on how we could make the Toolkit more useful?
Thank you for your contribution to this important survey.